

HIGH BRIDGE BOROUGH MUSEUM ARTIFACT DONATION FORM

Name _____

Street Address _____

Street Address Line 2 _____

City _____ State _____ Zip Code _____

Email _____ Phone _____

Items/Description _____

Terms:

1. You represent that you are the sole owner of the item(s) being donated and that you have the right to donate the item(s) to the Borough of High Bridge.
2. You agree to irrevocably donate the item(s) to the Borough of High Bridge and understand that the Borough of High Bridge will become the sole owner of the item(s) and have the right to maintain, store, display and/or dispose of the item(s) in its sole discretion.
3. If this donation is not accepted by the Borough of High Bridge, the item(s) will be returned to you. You agree that you are responsible to retrieve the items within 30 days, and for any costs associated with the Borough of High Bridge returning the item(s) to you.

Donor _____ Dated _____

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